01 FC:1501 02 FC:1504

1400.00 DA 300.00 DA

Q9 FAX 201 847 7008

BD Intel Propty Dept FC:8001

3.00 DA

Ø1003

amplete and send his form, together with applicable fee(s), to: Mail CO TRADE

PART B - FEE(S) TRANSMITTAL

Mail Stop ISSUE FEE

Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

(703) 746-4000 or Fax

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (s) specifying 2 new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)

26253

7590

06/07/2005

DAVID W. HIGHET, VP AND CHIEF IP COUNSEL BECTON, DICKINSON AND COMPANY I BECTON DRIVE, MC 110 FRANKLIN LAKES, NJ 07417-1880

Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmirtal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

Certificate of Mailing or Transmission

I hereby certify that this Fcc(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (703) 746-4000, on the date indicated below.

Lorraine	T. Ko	walchuk	(Dupositor	s nume)
Lamine	T.KO	Walcheck	<u></u>	maine)
September	- 6	2005		(Date)
		TOU DOCUMENTS	CONFIRMATION	70

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.	
10/667,092	09/18/2003	William G. Moulton	P-5049C1	22\$4	

TITLE OF INVENTION: CANTILEVER PUSH TAB FOR AN INTRAVENOUS MEDICAL DEVICE

APPLN, TYPE	SMALL ENTITY	ISSUE FE	E	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	МО	\$1400		\$300	\$1700	09/07/2005	
EXA	MINER	ART UNI	T	CLASS-SUBCLASS			
HAN, MARK K 37		3763		604-164010			
CFR 1.363). Change of correspond defress form PTO/SB/A7; Rev 03-02 Number is required. 3. ASSIGNEE NAME AN PLEASE NOTE: Unic recordation as set forth (A) NAME OF ASSIGNEE COIL, Dickery Dic	cation (or "Fee Address" Indice or more recent) attached. Us TO RESIDENCE DATA TO E as an assignee is identified b in 37 CFR 3.11. Completion NEE	Correspondence ation form the of a Customer BE PRINTED ON The clow, no assigned to of this form is NOT (B) Company	(1) the more agents (2) the more greatered to general tendenced, no the PATEN that will apply a substitute of RESIDEN	pear on the patent. If an assign for filing an assignment. CE: (CITY and STATE OR CO nklin Lakes, !	nt anomeys 1_MONY a member a 2 les of up to no name is 3 nee is identified below, the of UNTRY) New Jersey		
			nted on the Payment o	patent):	orporation or other private gr	roup entity Government	
4a. The following fee(s) as Lissue Fee	re encloscu:	40	•	in the amount of the fee(s) is er	closed.		
Publication Fee (No small entity discount permitted)		ted) .	Payment by credit card. Form PTO-2038 is attached.				
Advance Order - #			The Dir Deposit Ac	rector is hereby authorized by count Number 02-1666	charge the required fee(s), or (enclose an extra	r credit any overpayment, to copy of this form).	
a. Applicant claims The Director of the USPT	us (from status indicated abov SMALL ENTITY status. See O is requested to apply the Iss Publication Fee (if required) scords of the United States Pa	37 CFR 1.27.	ion Fee (if	icant is no longer claiming SMA eny) or to re-apply any previous se other than the applicant, a reg			
Authorized Signature	Mark	h		Date S	eptember(,,	2005	
Typed or printed name		ose			_{1 No.} 38,159		
This collection of informa an application. Confident submitting the completed this form and/or suggestion Box 1450, Alexandra, V Alexandria, Virginia 223	itality is governed by 35 U.S.C. application form to the USP ons for reducing this burden, a irginia 22313-1450. DO NOT	311. The information 122 and 37 CFR TO. Time will vary should be sent to the SEND FEES OR C	depending Chief Info	to obtain or retain a benefit by ollection is estimated to take 12 upon the individual case. Any compation Officer, U.S. Patent and D FORMS TO THIS ADDRES	omments on the amount of a Trademark Office, U.S. De S. SEND TO: Commissione	time you require to complete partment of Commerce, P.O. r for Patents, P.O. Box 1450,	

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

PTOL-85 (Rev. 12/04) Approved for use through 04/30/2007.

OMB 0651-0033 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE